South Carolina Department of Public Safety (KO5)

Name	Θ										Date	Date 2		र्फ	Social Security Number	ty Number
Residence	3								Official Headquarters	tarters				Č	Account Number	ber
Purpose of Trip	der i						4.5 A.)	
"Meals & subsistence are reportable as income if there	subs as Inc	Istence ome If t	are here	"REPORTABLE IN OR OUT OF STATE NONREPORTABLE - IN STATE NONREPORTABLE - OUT OF STATE	- ~	0504 0514	0172 0172	0520 0501	0502 0512	0503	0505	0506 0516	0509 0508 0508	0507 0517	0237* 0232* 0232*	
DATE DEP TIME AM (MO/DA)		TIME	FE		-5n	AUTO	PER	MEALS	Lobeine	AIR TRANS.	OTHER TRANS.	MISC. TRAVEL EXPENSE	SUBSIST ALLOW.	REGIST. FEES	NONSTATE EMPLOYEE TRAVEL	TOTAL
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Incurred by	me as	ne©essal *s; any m	ry trav eals o	reling expenses in the performance is lodging included in a conference		*	The state of the s	(SS)	4 / A				₹		(37)	(34)
or conventive cialm, and matter and c	on reg that ti confor	istration his claim ms with	fee har is tra	or convention registration fee have been deducted from this travel cialm, and that this claim is true and correct in every material matter and conforms with the requirements of state laws, rules and	-	x(35- 40	0172 (27)	980	8		8080 (RS)	33 3	35	360 7	(38)	101A.1
			(F)	(hh)	8	0172 (3) (3) (3) (3)	27 (S)	E	0812 (SC)	:	# (K)	33	818 (35)	35 36	38	101AL 2
			mployee	Signature			ř				Use T/C	Use 1/C 640 Travel Advance	Advance	6850	(43)	GRAND TOTAL (42)
			pprova	Approval Signature												

Preparation of Travel Support Document (See Exhibit A for actual form)

<u>Nbr</u>	<u>Item</u>	<u>Instructions</u>
1	Name	Enter name of person to be reimbursed. If the traveler is a state
		employee, enter the payee's name as it reads on payroll
2	Date	Enter date on which form is prepared
3	Social Security Number	Enter the social security number of the traveler
4	Residence	Enter the traveler's full home address
5	Official Headquarters	Enter the department name/address of the traveler's official place of business
6	Account Number	List the department's account code (10 digits) in which expenses are to be charged
7	Purpose of Trip	Explanation of travel, i.e., Lifesavers Conference, SES Meeting, etc.
8	Date (MM/DD)	Enter month and day on which expenses were incurred
9	Dep/Arr	Enter the following codes to indicate departure and return D = Departure A = Arrival
10	Time (AM/PM)	Enter the time of day (including AM or PM) only for departure and arrival times. Do not use military time
11	Destination of Travel Departure Destination Return	Enter place of departure and destination. Enter same information for return
12	1 or 2	The destination of the trip will determine the classification. 1 – In-state overnight trip 2 – Out of state overnight trip
13	Auto Miles	Enter the number of miles traveled in a private automobile
14	Per Diem	Enter the appropriate amount in accordance with General Appropriations Act travel regulations. Full-time state employees are ineligible
15	Meals	Enter the amount spent for meals in accordance with SC state travel regulations. Expenditures for meals without overnight travel is coded 0520
16	Lodging	Enter amount spent for lodging as supported by attached original paid receipt
17	Air Transportation	Enter the actual expense amount if air travel occurred on a commercial airline at traveler's expense
18	Other Transportation	Enter expenses incurred for the transportation other than air or private automobile
19	Miscellaneous Travel Expense	Enter expense incurred, i.e., parking fees, telephone, etc.
20	Subsistence Allowance	Enter the amount of the subsistence allowance in accordance with the General Appropriations Act and applicable Budget and Control Board Travel regulations
21	Registration Fees	Enter the expense for registration fees paid by traveler.
22	Non-State Employee Travel	Enter all expenses incurred by non-state employees. Expenditures for meals without overnight travel are coded 0237.
23	Total	Enter a total of amounts listed in fields 14-22 for each line of data
24	Total Auto Miles	Enter total of auto mileage. Enter in state travel on line 1 and out of state travel on line 2
25	Rate per Mile	Enter the rate per mile for reimbursement for use of private

*		automobile in accordance with the General Appropriations Act and
C +		Budget and Control board regulations
26	Total Auto Mileage	Enter the amount due for auto reimbursement (field 24 multiplied by
·		field 25)
27	Total Per Diem	Enter the total for per diem. In state travel on line 1 and out of state
		travel on line 2
28	Total Meals Reportable	Enter the total for meals coded 0520 (day trips only).
29	Total Meals Non-	Enter the total for meals. Enter in state travel on line 1 and out of
	Reportable	state travel on line 2
30	Total Lodging	Enter the total for lodging. Enter in state travel on line 1 and out of
		state travel on line 2
31	Total Air Transportation	Enter the total for air transportation on line 2
32	Total Other	Enter total for other transportation expenses. Enter in state travel on
	Transportation	line 1and out of state on line 2
33	Total Miscellaneous	Enter the total of miscellaneous travel expenses. Enter in state on
	Travel Expenses	line 1 and out of state on line 2. A brief explanation of each item
		claimed in this field must be entered in space on the last three
		lines of the form.
34	Total Subsistence	Enter the total for subsistence allowance coded 0509 (day trip)
	Allowance (Reportable	
	Income)	E to the total form the internal allowances. Employing date on line 4
35	Total Subsistence	Enter the total for subsistence allowance. Enter in state on line 1
	Allowance (Non-	and out of state on line 2
- 00	Reportable Income)	Enter the total of registration fee paid by the traveler. Enter in state
36	Total Registration Fees	travel on line 1 and out of state on line 2
	Total Magle	Enter the total for meals coded 0237. Reportable meals for non-
27	Total Meals	state employees
37	(Reportable Income for	State employees
38	Non-State Employees) Total Expenses (Non	Enter the total coded 0232, non-state employee travel (mileage,
30	Reportable Non-state	lodging, meals when in overnight travel status and other legal
	Employee)	charges necessary in the performance of their services).
39	Total Reportable	Enter the sum of items 28, 34 and 37
00	Expenses	Entor the dam of Reme 25, or and or
40	Total 1	Enter the sum of the totals in fields 25-38, inclusive in line 1
41	Total 2	Enter the sum of the totals in fields 25-38, inclusive in line 2
42	Grand Total	Enter the sum of amounts shown in fields 39, 40 and 41
43	Travel Advance	Enter the total amount of travel advance received by traveler
44	Employee Signature	Original signature of traveler requesting reimbursement. Must sign
		name exactly as shown on payroll.
45	Approval signature	Supervisor's original signature approval
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Travel Support Document Processing Tips

- All Travel Support Documents must be submitted to the Accounting Department within 30 days of the expense or before the end of the fiscal year. Whichever comes first.
- When signing a Travel Support Document, the name must be exactly as shown on state payroll.
- Generally, personal vehicles should not be used if there is a vehicle available in the motor pool.
 However, use of a personal vehicle when a employee elects not to use a motor pool vehicle is
 allowed when an Authorization of Reimbursement for Personal Vehicle Use form has been
 completed and approved by the Director/Deputy Director prior to the date of travel. The
 approved original must be submitted as part of the supporting documentation for the Travel Support
 Document.
- In determining the maximum amount of subsistence for meals that may be reimbursed, the following time schedule will be adhered to (as of June 2005):

	In state	Out of state	Depart before	Return after
<u>Breakfast</u>	\$6.00	\$7.00	6:30 am	11:00 am
Lunch	\$7.00	\$9.00	11:00 am	1:30 pm
<u>Dinner</u>	\$12.00	\$16.00	5:15 pm	8:30 pm
<u>Maximum</u>	\$25.00	\$32.00		

- Any meals or lodging included in the cost of a conference or convention registration fee must be deducted. (See item 21 for preparation of Travel Support Document)
- Six dollars may be claimed for breakfast if the employee is in travel status for more than six hours after 8:30 pm the night before.
- When a continental breakfast is provided, the employee is not required to use this offer.
- A reception is not considered a meal
- A banquet is considered a meal.
- Brunch is considered a breakfast.
- If two employees lodge together, the rate must be split and claimed evenly between the two. The name of the person the employee rooms with must be noted on the front of the Travel Support Document.
- If a guest or spouse other than another employee rooms with an employee, the single room rate only may be claimed. If the single room rate is the same as the double rate, a statement to that fact must be written on the front of the Travel Support Document at the bottom of the form.
- Original itemized receipts from hotel, parking, gas, etc. must accompany the Travel Support
 Document when submitted for processing. When parking charges are incurred at a temporary duty
 site, those charges should be indicated in the miscellaneous column (19) of the Travel Support
 Document. If it is not listed individually on the hotel receipt, a separate receipt is required.